

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031712

Entity Name: 6867 BELFORT OAKS PLACE, LLC

Current Principal Place of Business:

6890 BELFORT OAKS PLACE
JACKSONVILLE, FL 32216

Current Mailing Address:

6890 BELFORT OAKS PLACE
JACKSONVILLE, FL 32216

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIDNEY S. SIMMONS, II, ATTORNEY AT LAW
1050 RIVERSIDE AVENUE
JACKSONVILLE, FL 32204 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name WARREN, SCOTT D
Address 6890 BELFORT OAKS PLACE
City-State-Zip: JACKSONVILLE FL 32216

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SCOTT D. WARREN, MD

MANAGER

04/23/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date